

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>8/3/05</u>		2 Serial/Patent # <u>10/527,887</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
	Extension of Time			\$							
	Notice of Appeal/Appeal			\$							
	Petition			\$							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
		7 TOTAL AMOUNT OF REFUND		\$ <u>100.00</u>							
		8 TO BE REFUNDED BY:									
		Treasury Check									
		Credit Deposit A/C #:									
		9 <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;">1</td> <td style="width: 20px;">1</td> <td style="width: 20px;">--</td> <td style="width: 20px;">0</td> <td style="width: 20px;">8</td> <td style="width: 20px;">5</td> <td style="width: 20px;">5</td> </tr> </table>			1	1	--	0	8	5	5
1	1	--	0	8	5	5					
10 REASON:											
	Overpayment										
	Duplicate Payment										
	No Fee Due (Explanation):										
<u>Fee Code Correction</u>											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: _____ TITLE: _____											
SIGNATURE: _____ PHONE: _____											
OFFICE: _____											
<div style="display: flex; justify-content: space-between; font-size: small;"> <span>Repln. Ref: 08/04/2005 BCAMPREL 0022004300</span> <span>DAH:110855 Name/Number:10527887</span> </div>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: _____ DATE: _____											

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*